

## **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION

### FORM D

# Washington, D.C. 20549

OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response.....1

### NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY								
Prefix	Serial							
DAT	E RECEIVED							
1	I							

Name of Offering (□ ch Grand Vehicle Works Hold		endment and name had	s changed, and inc	dicate change.)		A.
Filing Under (Check box(e.	s) that apply):	☐ Rule 504	X Rule 505	□Rule	506 ☐ Section	on 4(6) ✓ □ ULOE
Type of Filing: X Nev	v Filing 🗆 🗛	nendment				RECEIVED 100
	Commence		IDENTIFICATIO	N DATA		1 see man
1. Enter the information	requested about th	e issuer				_ NUL 1 " 200" /
Name of Issuer (☐ check Grand Vehicle Works			nanged, and indica	ite change.)		
Address of Executive Office 600 Central Avenue,			d Street, City, Stat	te, Zip Code) Te	lephone Number (847) 681-8417	(Indituding Area Code)
Address of Principal Busin (if different from Executive		(Number and	d Street, City, Stat	te, Zip Code) Te	lephone Number	(Încluding Area Code)
Brief Description of Busine Holding company of t		d companies and real	estate			PROCECCE
Type of Business Organiza	ation					- COSED
× corporation	□ limited partr	ership, aiready formed		□ othe	r (please specify):	JUL 19 2004
☐ business trust	☐ limited partn	ership, to be formed				I belong a
Actual or Estimated Date of Jurisdiction of Incorporation	•	(Enter two-letter t	Year 0 2 U.S. Postal Service FN for other foreign	A.	□ Estimated for State:	FINANCIAL P

### GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

Doc: 233603/2/9338.086

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice

SEC 1972 (1/94) 1 of 9

### A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - · Each promoter of the issuer, if the issuer has been organized within the past five years.
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	□ Promoter	★ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)	-			Manaying Fattilet
Carlyle-GVW Holdings, L.L.C					
Business or Residence Addre		Street, City, State, Zip Co	ode)		<del></del>
1001 Pennsylvania Avenue, N	N.W., Suite 200S.	Washington, D.C. 20004			
Check Box(es) that Apply:	☐ Promoter	✗ Beneficial Owner	☐ Executive Officer	□ Director	□ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Andrew Taitz Limited Partners	ship				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
c/o Goldberg, Kohn, Bell, Blad	ck, Rosenbloom &	Moritz, Ltd., 55 E. Monre	oe, Suite 3700, Chicago,	IL 60603	
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	✗ Executive Officer	✗ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Taitz, Andrew		, <u> </u>			
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
600 Central Avenue, Suite 21	4, Highland Park,	IL 60035			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	X Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Ledford, Gregory					
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
1001 Pennsylvania Avenue, I	N.W., Suite 200S,	Washington, D.C. 20004	ļ		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	✗ Executive Officer	✗ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Palmer, Adam					
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
1001 Pennsylvania Avenue, I	N.W., Suite 200S,	Washington, D.C. 20004	<u> </u>		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	✗ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Kodosky, Christopher					
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		<del> </del>
600 Central Avenue, Suite 21	4, Highland Park,	IL 60035			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	★ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if Billet, Ryan	individual)				
Business or Residence Addre 600 Central Avenue, Suite 21	l4, Highland Park,	IL 60035			
	(Use blank	sheet, or copy and use a	dditional copies of this sh	eet, as necessary	.)

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

### A. BASIC IDENTIFICATION DATA

- 3. Enter the information requested for the following:
  - · Each promoter of the issuer, if the issuer has been organized within the past five years.
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	X Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Dost, Michael C.					
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
600 Central Avenue, Suite 21	4, Highland Park,	IL 60035			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	X Executive Officer	□ Director	☐ General and/or Managing Partner
Lewelling, John					
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
600 Central Avenue, Suite 21	4, Highland Park,	IL 60035			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	<b>✗</b> Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Feltman, David					
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
600 Central Avenue, Suite 21	4, Highland Park,	IL 60035			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	✗ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Naseman, Ray					
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
600 Central Avenue, Suite 21	14, Highland Park,	IL 60035			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	X Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Gruber, John					
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
600 Central Avenue, Suite 21	14, Highland Park.	IL 60035			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	★ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Kozyrkov, Vadim					
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)	······································	
600 Central Avenue, Suite 2	14, Highland Park	IL 60035			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	X Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if Schwartz, Eric	individual)				
Business or Residence Address 600 Central Avenue, Suite 2			ode)		
	(Use blank	sheet, or copy and use a		sheet, as necess	sary.)
Failure to file notice in the a	appropriate state		TENTION of the federal exemp	tion. Conversel	y, failure to file the appropriate fede

notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (1/94) 3 of 9

											Yes	No
. Has the i	ssuer sold,	or does the	issuer inte	nd to sell, t	o non-accre	dited invest	tors in this c	offering?			×	
			An	swer also ii	n Appendix,	Column 2,	if filing unde	er ULOE.				
2. What is t	he minimun	n investmer	nt that will b	e accepted	I from any in	dividual? .					\$ No Minir	mum
											Yes	No
3. Does the	offering pe	rmit joint ov	vnership of	a single un	it?						×	
of similar listed is a name of	r remunerati an associate	on for solic ed person o or dealer. If	itation of pu r agent of a more than	rchasers in broker or o five (5) per	as been or w connection dealer regist sons to be li aler only.	with sales of	of securities ne SEC and	in the offer l/or with a s	ing. If a pe tate or state	rson to be		
Full Name (La	ast name fir	st, if individ	ual)									
Business or F	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip 0	Code)						i.
Name of Asso	ociated Brok	er or Deale	er									<u></u>
States in Whi	ch Person I	isted Has 9	Solicited or	Intende to 9	Solicit Purch	acore .		<del></del>				
[AL]	[ AK]	[ AZ ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[ GA ]	[HI]	[ IL]
[  L ]	[IN]	[ AI ]	[KS]	[KY]	[LA]	[ME]	[MD]	[ MA ]	[ MI ]	[MN]	[MS]	[ MO
					[ - 1	[ 171 ]	[ 15.12 ]	[ 140 ( ]	[ ]	f tanta 1	[IVIO]	[ 10.0
		• •			I NM 1	[ NY ]	LNC I	( ND 1	1 HO 1	(OK)	[OR]	( PA )
[MT] [RI]	[NE] [SC]	[NV] [SD]	[ NH ] [ TN ]	[LN] [XT]	[ NM ] [ UT ]	[NY] [VT]	[ NC ] [ VA ]	[ ND ] [ WA ]	[OH] [WV]	[ OK ]	[OR] [WY]	[ PA ]
[ MT ] [ RI ] Full Name (La Business or F	[ NE ] [ SC ] ast name fire	[ NV ] [ SD ] st, if individent	[ NH ] [ TN ] ual)	[LN] [XT]	[UT]	[VT]				•		
[ MT ] [ RI ] Full Name (La Business or F	[ NE ] [ SC ] ast name fire	[ NV ] [ SD ] st, if individent	[ NH ] [ TN ] ual)	[LN] [XT]	[UT]	[VT]				•		
[ MT ] [ RI ] Full Name (La Business or F	[ NE ] [ SC ] ast name fire Residence A	[ NV ] [ SD ] st, if individent i	[ NH ] [ TN ] ual) mber and S	[ NJ] [ TX ]	[ UT ] State, Zip C	[VT]				•		
[ MT ] [ RI ] Full Name (La Business or F Name of Asso	[ NE ] [ SC ] ast name fire Residence A	[ NV ] [ SD ] st, if individual ddress (Nu	[ NH ] [ TN ] ual) mber and S er Solicited or	[ NJ] [ TX ]	[ UT ] State, Zip C	[VT]				•		
[ MT ] [ RI ] Full Name (La Business or F Name of Asso	[ NE ] [ SC ] ast name fire Residence A ociated Broke	[ NV ] [ SD ] st, if individual ddress (Nu	[ NH ] [ TN ] ual) mber and S er Solicited or	[ NJ] [ TX ]	[ UT ] State, Zip C	[VT]				•		[PR]
[ MT ] [ RI ] Full Name (La Business or F  Name of Asso States in Whi (Check "	[ NE ] [ SC ] ast name fire Residence A ociated Broke ch Person L All States**	[ NV ] [ SD ] st, if individual ddress (Nu	[ NH ] [ TN ] ual) mber and S er Solicited or	[ NJ] [ TX ]  street, City,	[ UT ]  State, Zip C	[VT]	[AV]	[WA]	[WV]	[WI]	[WY]	[PR]
[ MT ] [ RI ] Full Name (La Business or Fi Name of Asso States in Whi (Check "	[ NE ] [ SC ] ast name fire Residence A ociated Brok ch Person L All States" (	[ NV ] [ SD ] st, if individual ddress (Nu ker or Deale Listed Has S or check inc	[ NH ] [ TN ] ual) mber and S er Solicited or dividual State [ AR ]	[ NJ] [ TX ]  street, City,  Intends to Ses)	State, Zip C	[VT]	[VA]	[WA]	[FL]	[WI]	[WY]	[PR]
[ MT ] [ RI ] Full Name (La Business or F  Name of Asso States in Whi (Check " [ AL ] [ IL ]	[ NE ] [ SC ] ast name fire Residence A ociated Broke ch Person L All States" ( [ AK] [ !N ]	[ NV ] [ SD ] st, if individual defenses (Nucleon of Deale steed Has stor check inc [ AZ ] [ IA ]	[ NH ] [ TN ] ual) ual)  mber and S er  Solicited or dividual State [ AR ] [ KS ]	[ NJ] [ TX ]  Interest, City,  Intends to Ses) [ CA ] [ KY ]	State, Zip C	[VT] Code) nasers [CT] [ME]	[VA]	[WA]	[WV]	[WI]	[HI]	[ID] [MO [PA]
[ MT ] [ RI ] Full Name (La Business or Fi Name of Asso States in Whi (Check " [ AL ] [ MT ] [ MT ]	[ NE ] [ SC ] ast name fire Residence A ociated Brok ch Person L All States" (         [ AK]         [ NE ]         [ SC ]	[ NV ] [ SD ] st, if individual deress (Nucleon of Deale Listed Has S or check inc [ AZ ] [ IA ] [ NV ] [ SD ]	[ NH ] [ TN ] ual)  mber and S er  Solicited or dividual Stat [ AR ] [ KS ] [ NH ] [ TN ]	[ NJ] [ TX ]  Intends to Ses) [ CA ] [ KY ] [ NJ ]	State, Zip C	[VT]  Code)  assers  [CT]  [ME]  [NY]	[VA]	[WA]	[WV]	[WI] [GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO [PA]
[ MT ] [ RI ] Full Name (La Business or R  Name of Asso States in Whi (Check " [ AL ] [ MT ] [ MT ]	[ NE ] [ SC ] ast name fire Residence A ociated Brok ch Person L All States" (         [ AK]         [ NE ]         [ SC ]	[ NV ] [ SD ] st, if individual deress (Nucleon of Deale Listed Has S or check inc [ AZ ] [ IA ] [ NV ] [ SD ]	[ NH ] [ TN ] ual)  mber and S er  Solicited or dividual Stat [ AR ] [ KS ] [ NH ] [ TN ]	[ NJ] [ TX ]  Intends to Ses) [ CA ] [ KY ] [ NJ ]	State, Zip C	[VT]  Code)  assers  [CT]  [ME]  [NY]	[VA]	[WA]	[WV]	[WI] [GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO [PA]
[ MT ] [ RI ] Full Name (La Business or F  Name of Asso States in Whi (Check " [ AL ] [ MT ] [ RI ] Full Name (La	[ NE ] [ SC ] ast name fire Residence A  ociated Brok  ch Person L  All States" (         [ AK]         [ NE ]         [ SC ] ast name fire	[ NV ] [ SD ] st, if individual i	[ NH ] [ TN ] ual) ual)  mber and S er  Solicited or dividual Stat [ AR ] [ KS ] [ NH ] [ TN ] ual)	[ NJ] [ TX ]  Intends to Ses) [ CA ] [ KY ] [ NJ ] [ TX ]	State, Zip C	Code)  Hasers  [CT]  [ME]  [NY]	[VA]	[WA]	[WV]	[WI] [GA] [MN] [OK]	[HI] [MS] [OR]	[PR
[ MT ] [ RI ] Full Name (La Business or F  Name of Asso States in Whi (Check " [ AL ] [ MT ] [ MT ] [ RI ] Full Name (La	[ NE ] [ SC ] ast name fire Residence A  ociated Brok  ch Person L  All States" (         [ AK]         [ NE ]         [ SC ] ast name fire	[ NV ] [ SD ] st, if individual i	[ NH ] [ TN ] ual) ual)  mber and S er  Solicited or dividual Stat [ AR ] [ KS ] [ NH ] [ TN ] ual)	[ NJ] [ TX ]  Intends to Ses) [ CA ] [ KY ] [ NJ ] [ TX ]	State, Zip C	Code)  Hasers  [CT]  [ME]  [NY]	[VA]	[WA]	[WV]	[WI] [GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO [PA
[ MT ] [ RI ] Full Name (La Business or F  Name of Asso States in Whi (Check " [ AL ] [ MT ] [ RI ] Full Name (La Business or F	[ NE ]   [SC ] ast name fire Residence A  ociated Brok  ch Person L  All States" (   [ NK ]   [ NE ]   [ SC ]  ast name fire Residence A	[ NV ] [ SD ] st, if individual ddress (Nu ker or Deale Listed Has S or check inc [ AZ ] [ NV ] [ SD ] st, if individual	[NH] [TN] ual)  mber and S er  Solicited or dividual Stat [AR] [KS] [NH] [TN] ual)	[ NJ] [ TX ]  Intends to Ses) [ CA ] [ KY ] [ NJ ] [ TX ]	State, Zip C	Code)  Hasers  [CT]  [ME]  [NY]	[VA]	[WA]	[WV]	[WI] [GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO [PA
[ MT ] [ RI ] Full Name (La Business or F  Name of Asso States in Whi (Check " [ AL ] [ MT ] [ RI ] Full Name (La Business or F	[ NE ] [ SC ] ast name fire Residence A  ociated Brok  Ch Person L  All States" (     [ AK]     [ NE ]     [ SC ] ast name fire  Residence A	[ NV ] [ SD ] st, if individual steep of Deale stee	[NH] [TN] ual)  mber and S er  Solicited or dividual Stat [AR] [KS] [NH] [TN] ual)	[ NJ] [ TX ]  Intends to Ses) [ CA ] [ KY ] [ NJ ] [ TX ]	State, Zip ( Solicit Purch  [CO] [LA] [NM] [UT]	[VT]  Code)  assers  [CT]  [ME]  [NY]  [VT]	[VA]	[WA]	[WV]	[WI] [GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO [PA
[ MT ] [ RI ] Full Name (La Business or F Name of Asso States in Whi (Check " [ AL ] [ IL ] [ MT ] [ RI ] Full Name (La Business or F Name of Asso	[ NE ] [ SC ] ast name fire Residence A  ociated Brok  Ch Person L  All States" (     [ AK]     [ NE ]     [ SC ] ast name fire  Residence A	[ NV ] [ SD ] st, if individual steep or Deale steep or Deale steep or Check incomplete or Check incomplet	[ NH ]    [TN ] ual) ual) ual)  Solicited or dividual State [ AR ]    [ KS ]    [ NH ]    [ TN ] ual)  Imber and S	[ NJ] [ TX ]  Intends to Ses) [ CA ] [ KY ] [ NJ ] [ TX ]	State, Zip C  Solicit Purch  [ CO ] [ LA ] [ NM ] [ UT ]  State, Zip C	[VT]  Code)  assers  [CT]  [ME]  [NY]  [VT]	[VA]	[WA]	[WV]	[WI] [GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO [PA
[ MT ] [ RI ] Full Name (La Business or F Name of Asso States in Whi (Check " [ AL ] [ IL ] [ MT ] [ RI ] Full Name (La Business or F Name of Asso	[ NE ] [ SC ] ast name fire Residence A  ociated Brok  ch Person L  All States" (     [ AK]     [ NE ]     [ SC ] ast name fire  Residence A  ociated Brok  ich Person L	[ NV ] [ SD ] st, if individual steep or Deale steep or Deale steep or Check incomplete or Check incomplet	[ NH ]    [TN ] ual) ual) ual)  Solicited or dividual State [ AR ]    [ KS ]    [ NH ]    [ TN ] ual)  Imber and S	[ NJ] [ TX ]  Intends to Ses) [ CA ] [ KY ] [ NJ ] [ TX ]	State, Zip C  Solicit Purch  [ CO ] [ LA ] [ NM ] [ UT ]  State, Zip C	[VT]  Code)  assers  [CT]  [ME]  [NY]  [VT]	[VA]	[WA]	[WV]	[WI] [GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO [PA [PR
[ MT ] [ RI ] Full Name (La Business or F  Name of Asso States in Whi	[ NE ] [ SC ] ast name fire Residence A  ociated Brok  Ch Person L  All States" (   [ NE ] [ SC ] ast name fire Residence A  ociated Brok  ich Person L  All States" (   [ All States" (   [ All States" (   [ All States" (	[ NV ] [ SD ] st, if individual steep or Deale steep or Check income or Deale steep or Deale steep or Deale steep or Check income or Check incom	[ NH ] [ TN ] ual) ual) ual)  Solicited or dividual State [ AR ] [ NH ] [ TN ] ual) ual)  Solicited or dividual State [ AR ]	[ NJ] [ TX ]  Intends to Ses) [ CA ] [ KY ] [ NJ ] [ TX ]	State, Zip ( Solicit Purch  [ CO ] [ LA ] [ NM ] [ UT ]	[VT] Code)  Rasers [CT] [ME] [VT]  [VT]	[VA]	[WA]  [DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[WI]	[HI] [MS] [OR] [WY]	[ID] [MO [PA] [PR
[MT] [RI] Full Name (La Business or F Name of Asso States in Whi (Check " [AL] [MT] [RI] Full Name (La Business or F Name of Asso States in Whi (Check " [AL]	[ NE ]     [SC ] ast name first Residence A  cociated Broke  Ch Person L All States" (     [NE ]     [SC ] ast name first Residence A  ociated Broke ich Person L (All States" (     [AK]	[ NV ] [ SD ] st, if individual ddress (Nu ker or Deale Listed Has S or check inc [ AZ ] [ NV ] [ SD ] st, if individual ddress (Nu ker or Deale Listed Has S or check inc [ AZ ]	[NH] [TN] ual)  mber and S er  Solicited or dividual State [NH] [TN] ual)  mber and S er  Solicited or dividual State [NH] [TN] ual)	[ NJ] [ TX ]  Intends to Ses) [ CA ] [ NJ ] [ TX ]  Street, City,	State, Zip (  Solicit Purch  [CO] [LA] [NM] [UT]  State, Zip (  Solicit Purch	[VT] Code)  Rasers [CT] [ME] [VT]  Code)	[VA]  [DE] [MC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[WI]  [GA]  [MN]  [OK]  [WI]	[HI] [MS] [OR] [WY]	

(Use Blank Sheet, or copy and use additional copies of this sheet, as necessary.)

Doc: 233603/2/9338.086 SEC 1972 (1/94) 4 of 9

### Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\boxtimes$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount A Type of Security Offering Price Iready Sold 0 \$ □ Preferred **✗** Common Convertible Securities (including warrants) \$ 0 \$ 0 \_\_\_\_\_\_\$ .....\$ Other (Specify: 0 \$ .....\$ 1,123,287.60\* \$ 1,123,287.60\* Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases 900.334.00\* Total (for filings under Rule 504 only) ..... Answer also in Appendix, Column 3, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information required for all securities sold by the issuer, to date, in offering of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Type of offering Security Sold Rule 505 Common \$ 1,123,287.60\* Common \$ 1,123,287.60\* Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees ..... 0 Printing and Engraving Costs ..... 0 Legal Fees × 25,000 Accounting Fees 0 0 n Other Expenses (identify) 0 Total ...... 25,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Enter the aggregate offering price of securities included in this offering and the total amount already sold.

<sup>\*</sup> Assumes the maximum possible contingent payment will be paid by each investor

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES A	ND U	SE	OF PROCEED	)S	1.25	Ser and and and
	b. Enter the difference between the aggregate offering price given in response to Part Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference the "adjusted gross proceeds to the issuer."	e is				\$_	1,098,287.60
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to used for each of the purposes shown. If the amount for any purpose is not known, furnish estimate and check the box to the left of the estimate. The total of the payments listed must exthe adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above	an Jual					
				Payments to Officers, Directors, & Affiliates			Payments to Others
	Salaries and fees		\$_	0	_ 🗆	\$_	0
	Purchase of real estate		\$_	0		\$_	0
	Purchase, rental or leasing and installation of machinery and equipment		\$_	0		\$_	0
	Construction or leasing of plant buildings and facilities		\$_	0		\$_	0
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issue pursuant to		\$_	0		\$_	0
	Repayment of indebtedness		\$_	0		\$_	0
	Working capital	×	\$_	1,098,287.60		\$_	0
	Other (specify):		\$_	0		\$_	0
	Column Totals		\$_	0		\$_	0
	Total Payments Listed (column totals added)			<b>×</b> \$ 1	,098,	287	60
777	D. FEDERAL SIGNATURE				, N.S.	Ş	
sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchangormation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) or	If th	is no	otice is filed und	ler Rı	ule s	
	uer (Print or Type) and Vehicle Works Holdings Corporation  Signature  William CD	7	t		Date July 1	3, 2	004
	me of Signer (Print or Type)  Title of Signer (Print or Type)  Chief Financial Officer						
Int	ATTENTION entional misstatements or omissions of fact constitute federal criminal violati	ons.	(S	ee 18 U.S.C. 1	001.	)	

SEC 1972 (1/94) 6 of 9